U S Department of Labor
Office of Labor Management
Standards
Washington DC 20210

This report is mandatory under P L 86

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0188 Expires 11 30 2006

This report is mandatory under P L 86 257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

E OLMS ST	
1 File Number U	2 Fiscal Year Covered From Through 77 / 77 / 78 / 79 / 79 / 79 / 79 / 79 /
3 Name and address of person filing	4 Name file number and address of labor organization
Name Wight	Name TEAMSTERS LOCKIE 682
•	Labor Organization File Number
PO Box Bldg Room No If any	PO Box Building and Room Number if any
Street 924 Old Porost RD	Street 5730 Elizabeth AUC Commission Con
City Goald Harris Hall Harris Hall	City 社会大人OURS 在特別的 自動學語 TENNER TO
State 10 463037 MEN ZIP Code + 4	State M0 63//0 ZIP Code + 4
5 Position in labor organization Santary Treasure / Business / Business / Business	
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)	
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	

6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name (A proposition of the prop	
Trade Name If any	The state of the s
PO Box Bldg Room No If any	Marie III and the later of the
Street Street Street	7 b Amount
City City	Control of the second of the s
State State ZIP Code + 4 This way	

Signature

15 Signature and verification The undersigned declares under penalty of Ferbury and other applicable penalties of the invital air of the information		
submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the		
undersigned s knowledge and belief true contract and complete (See the section on penalties in the instructions)		

Signed

On 81/505

Telephone Number

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested 8 Name and address of Business (including trade name if any) 9 Business deals with a Labor Organization Trade Name if any **b** Trust PO Box, Bidg Room No If any c Employer 11 a Nature of such dealing 10 If 9 b or 9 c is checked give trust or employer's name Trade Name if any PO Box Bldg Room No If any 11 b Approximate dollar value of such dealing of interest held or income received 12 b Amount. C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value 14 a Nature of payment. 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name TE Trade Name If any PO Box Bldg Room No If any ZIP Code + 4 常地市通 14 b Amount of payment 13 b Is the Business an Employer or Consultant

or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant	14 a Nature of payment	
(including trade name if any)		
Name Name		
Trade Name If any		
PO Box Bldg Room No If any [保存] 原始 [] 中央 [
Street		
City Company of the c		
State State ZIP Code + 4		
13 b Is the Business an Employer or Consultant?	14 b Amount of payment	